

BU9-98-110DIV  
09/666,325

#26/G  
10/21/03  
Sunder

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re patent application of

Armbrust et al.

Serial No.: 09/666,325

Group Art Unit: 2811

Filed: September 21, 2000

Examiner: Kang, D.

For: SELF-ALIGNED COPPER SILICIDE FORMATION FOR IMPROVED  
ADHESION/ELECTROMIGRATION

Commissioner of Patents  
PO BOX 1450  
Alexandria, VA 22313-1450

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OCT 16 2003

**AMENDMENT UNDER 37 C.F.R. §1.111**

**OFFICIAL**

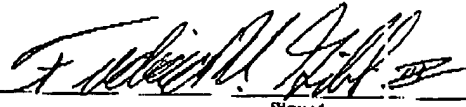
Sir:

In response to the Office Action mailed July 17, 2003, please amend the application as follows.

**IN THE CLAIMS:**

Please cancel claim 27 and amend the remaining claims as follows.



<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>BU998110DIV</b>	
Applicant(s): <b>Armbrust et al</b>					
Serial No. <b>09/666,325</b>	Filing Date <b>September 21, 2000</b>	Examiner <b>Kang, D.</b>	Group Art Unit <b>2811</b>		
Invention: <b>SELF-ALIGNED COPPER SILICIDE FORMATION FOR IMPROVED ADHESION/ELECTROMIGRATION</b>					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	4 -	3 =	1 x	\$86.00	\$86.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$86.00</b>
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. <b>09-0456</b> in the amount of <b>\$86.00</b> <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>09-0456</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: <b>10/16/03</b>		
<b>Frederick W. Gibb, III</b> Registration No. 37,629 McGinn & Gibb, PLLC 2568-A Riva Road Suite 304 Annapolis, MD 21401 Customer No. 29154			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  _____ Signature of Person Mailing Correspondence  _____ Typed or Printed Name of Person Mailing Correspondence		
CC:					

P11LARGE/REV06